RENTAL APPLICATION

The undersigned hereby make application to lease the property described as:				
located in the County/City of				
owned by the Commonwealth of Virginia, Department of Transportation, and hereby certify th				
information set forth below to be true and correct.				
I. Lessee Information:				
The number of proposed adult occupants is For each proposed adult occupant (us				
extra pages as necessary), complete the following:				
1. Full Name:				
a. Social Security #:				
b. Date of Birth:				
c. Marital Status:				
d. Name of Spouse:				
e. Present Address:				
(1) Own or Lease?				
f. Name and Address of Present Employer:				
Telephone:				

	(1) Dates of Employment: From:			
	To:			
	(2) Salary and Earnings:			
	(3) Position:			
g.	Name and Address of Future Employer (If Starting New Job or Transferring):			
Tele	ephone:			
	(1) Employment Commencement Date:			
	(2) Salary and Earnings:			
	(3) Position:			
h.	If self-employed or in a partnership, attach on a separate page a statement giving			
	the name, address and telephone of the business, and a complete description of			
	its nature, size, operations, length of time in business and amount of net earnings			
	for the (applicant) owner or partner during the previous two years.			
i.	Have you ever filed for bankruptcy of any type? If so, explain the			
	circumstances on a separate page and specify the court, filing date and case			
	number.			
j.	Are there any outstanding judgments against you? If so, describe on a			
	separate page giving the creditor's name and address, the amount owed and			
	circumstances.			
k.	Smoker or non-smoker:			
l.	List and describe (on a separate page) other sources of income and assets that			
	the applicant asks to be considered as a part of the evaluation of this application.			

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b.	Date of Birth:			
C.	Marital Status:			
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Telephone:				
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		l.	List and describe (on a separate page) other sources of income and assets that
			the applicant asks to be considered as a part of the evaluation of this application.
II.	Gei	neral	Information:
	1.	Nui	mber of proposed occupants who are less than 18 years of age:
	2.	For	each proposed occupant under 18 years, give the following information (use extra
		pag	ges as necessary):
		a.	Name:
		b.	Date of Birth:
		C.	Sex:
		a.	Name:
		b.	Date of Birth:
		C.	Sex:
		a.	Name:
		b.	Date of Birth:
		C.	Sex:

3.	Describe the type and size (approximate weight) of each proposed pet to be kept at the		
	premises:		
4.	Describe the type, size, and approximate weight of any particularly heavy piece of		
	property (such as a safe, water bed, shop equipment, etc.) to be kept on the premises:		
5.	Describe the make, model and year of each motor vehicle to be initially kept at the		
	premises:		
6.	Describe the type, make, model and length of any trailers, recreational vehicles or boats		
	to be kept at the premises:		
This app	olication will constitute a part of any lease for the premises.		
Dated th	is, 20		
	Applicant/Lessee		
	Applicant/Lessee		
	to the second second		

(Note: This application must be signed by each proposed adult occupant of the premises, excluding adult or minor children of the applicant(s).)